



Early Journal Content on JSTOR, Free to Anyone in the World

This article is one of nearly 500,000 scholarly works digitized and made freely available to everyone in the world by JSTOR.

Known as the Early Journal Content, this set of works include research articles, news, letters, and other writings published in more than 200 of the oldest leading academic journals. The works date from the mid-seventeenth to the early twentieth centuries.

We encourage people to read and share the Early Journal Content openly and to tell others that this resource exists. People may post this content online or redistribute in any way for non-commercial purposes.

Read more about Early Journal Content at <http://about.jstor.org/participate-jstor/individuals/early-journal-content>.

JSTOR is a digital library of academic journals, books, and primary source objects. JSTOR helps people discover, use, and build upon a wide range of content through a powerful research and teaching platform, and preserves this content for future generations. JSTOR is part of ITHAKA, a not-for-profit organization that also includes Ithaka S+R and Portico. For more information about JSTOR, please contact support@jstor.org.

THE AMERICAN JOURNAL OF NURSING

VOL. VI

NOVEMBER, 1905

NO. 2

EDITORIAL COMMENT



THE ILLINOIS TRAINING-SCHOOL LEADS IN AFFILIATION

THE Illinois Training-School of Chicago is the first of the large schools to open its doors for affiliation with small schools to meet the demands of State registration for a more extended experience for the pupils of small hospitals. Arrangements with two of these small schools are already completed, while a third is under consideration.

The Dixon Hospital will give two years of training and then send its pupils to the Illinois for the third year, where medical, the diseases of children, obstetrical, and contagious experience will be had. The Passavant Hospital School will send its pupils to the Illinois for training in children's diseases.

This is a splendid beginning and will make registration comparatively easy when once the Illinois bill has passed—in fact, it will perhaps remove one of the most serious obstacles to the passage of the bill, as it solves the problem of the small hospital training-school.

We congratulate Miss Rose and the managers of the Illinois Training-School upon having taken this most progressive step. It is time that some of the large hospitals in New York State wake up to their responsibility to the smaller hospitals. The demand for such affiliation is very great, and in order to make State registration a complete success there must be a more cordial relationship established between the large and small schools.

THE ELIGIBLE VOLUNTEER CORPS

SINCE the last number of the JOURNAL was published we have had Mrs. Kinney send us copies of the forms and circulars that are sent to

would-be applicants of the Eligible Volunteer List, that we might again go over them critically, to find out, if possible, in what way they fail to meet the approval of the applicants.

We see nothing in these papers that explains the difference between the volunteer service and the regular service in the Nurse Corps—in fact, the papers are identical for both departments, which we think is a mistake.

The Eligible Volunteer nurses are for a possible emergency or national calamity, which implies a short term, and it would seem to us hardly necessary that the volunteers should be compelled to pledge themselves for a three-year term of enlistment. We are of the opinion that if such an enrolment could be reduced to one year, and a special circular issued explaining a little more fully just what the volunteer service is supposed to mean, that many nurses who are hesitating to pledge themselves for three years would immediately enroll for the shorter term.

The ruling that travelling expenses shall be returned, referred to in Miss Johnson's paper, has been made, undoubtedly, as result of experience.

We take some exception, also, to the rather formidable health certificates that are called for. There are two forms to be filled out, one by the nurse, the other by a doctor, very many of the questions being in duplicate—and when all has been recorded in the Surgeon-General's office a nurse might have the feeling that she no longer possessed any internal privacy.

For the regular army nurse service this is all very necessary, but for an emergency service of a shorter term—if such were possible—we think one health certificate covering the essential points would be enough.

However, we do not consider that any of these objections are of sufficient importance to account for the seeming lack of interest on the part of American nurses, nor do we feel that our contributors have in any sense gotten at the heart of the matter, although we are very grateful to them both for the expression of their views.

We ask again, Why is it that the Eligible Volunteer Service does not appeal to American nurses?

THE QUESTION OF LOYALTY

ONE of our correspondents in the last number of the *JOURNAL* refers to the question of the lack of loyalty on the part of physicians towards nurses, and deplors the fact that while nurses are from the first day of entering the hospital "trained" to be loyal to the doctor,

there is no corresponding loyalty required of the doctors towards the nurses.

This is in the main true. There are many individual exceptions, of course, but the medical profession as a body has not adopted a code of ethics towards the nursing profession, nor do we know that it is considering such a step at the present time, and even if such a code were framed and adopted by, we will say, the American Medical Association, it would not be observed by all of its members, because many of those members are not loyal to all of the members of their own profession, as none know better than nurses.

The medical profession is led and dominated by its brightest and best men, as is every profession and every organized group of workers. We are apt to judge of the whole by the ideals and standards of the leaders, and are subject to constant disillusionments in our intercourse with the great rank and file who have not been brought up to the level of the best. This is true of the nursing profession as well as the other professions.

The medical profession, like the nursing profession, has risen from a very obscure and humble origin to its present dignified position. It has done this slowly, taking several hundred years to reach its present state of development, and has not yet ceased to progress. Nursing as a profession began to rise less than fifty years ago.

The medical profession has gotten into the habit of looking upon nurses as a class of people who were once upon a time upon the same low level as themselves, and therefore as inferior servants, because during those early days of medical development nurses stood still and the rank and file remained ignorant and, we may say, ostracized, while the doctors were stepping up a peg both socially and intellectually.

The habit of subordination was very strongly established in those early days in the relationship between doctors and nurses, and it is that habit of thought which still remains in a very marked degree that is the cause of what nurses sometimes call disloyalty.

A certain type of nurse even to-day cannot think or act without a doctor's instruction; a certain type of doctor can think of nurses only as his subordinates and servants; this attitude is hereditary, it has come down to him through the centuries, and he in his turn has taught or tried to teach it to the nurses whom he has helped to train.

As the ranks of nursing have become filled with better educated women, many of these socially much above the men they must work under, the attitude of condescension assumed by the medical men is quite intolerable, and as a result there is developing an undercurrent of antagonism that is detrimental to the best interests of the sick.

WHAT CAN BE DONE ABOUT IT?

First, we think the whole matter is simply a question of evolution. The older men who were educated during the old régime of nurses are fast passing away; the younger men who have been associated with nurses in training during their own period of medical education or practice have less of this "attitude" than the men of the last generation, although we have to acknowledge that it is dying hard.

With the standards of nursing education constantly improving, with the selection of nurses made with greater care, with a recognized legal and professional status, there will come about a better understanding between the members of the two professions of medicine and nursing, and the relation of master and servant will give way to that of professional co-workers.

In the meantime, is there nothing to be said in regard to the ethical relations existing between nurses?

How can a doctor be criticised for unjustly dismissing a nurse from a case when he can find twenty nurses ready and waiting to fill the vacancy without making so much as a protest against his treatment of a fellow-worker? Are such nurses loyal to their own profession?

Can we expect deference and courtesy from the members of the hospital family towards the superintendent of the training-school when that superintendent makes a practice at the table of making fun of the woman holding a similar position in a neighboring hospital, speaking of her always by a ridiculous nickname and never missing an opportunity to criticise her work and her nurses. Is such a woman loyal to her profession?

Is a superintendent justified in speaking of her pupils to the members of the hospital board and medical staff as if they belonged to an inferior class of people, and are the pupils to be excused who refer to their superintendent by her given name when speaking of her to the patients and house doctors?

These things are done, not by the best in the ranks, but too frequently by individual women "in good standing." And, again, the custom followed by so many pupils, and also graduates, of addressing each other by the last name is unwomanly, undignified, and disloyal. Do we ever hear a doctor speak to a nurse of a brother physician as "Smith" or "Jones"? Does he ever fail to use the professional title? We never have known such men, and we doubt if they can be found in any number among the men whom we respect.

We think the nursing profession has a good many "beams" still left to pluck out. There could be no question of disloyalty on the part of doctors towards nurses if nurses stood solidly together in their

loyalty towards each other. No man can practise medicine among the best people and be in such bad repute with the nurses of his community that he cannot get one of them to take his cases. In just the proportion that a nurse depends upon the doctor for her work, the doctor depends upon the nurse for the success of his cases. When nurses are as loyal to each other as the doctors are to each other, then the doctors will be obliged to be as loyal to the nurses as the nurses now are to them.

This whole question of loyalty needs to be given greater attention in the training-school, both by precept and example,—the superintendents are not altogether blameless,—and it should also be taken up in the *alumnæ* associations and clubs, and when a member is shown to have been grossly disloyal to a sister nurse she should be disciplined by some expression of disapproval from the association as a whole.

We have been obliged to postpone the discussion of "Training-Schools on the Pacific Coast" to make space for the more pressing subject of loyalty, some flagrant instances of disloyalty among nurses having come to our knowledge since the subject was introduced in the last number of the *JOURNAL*.

IMPORTANT TO ALUMNÆ MEMBERS

At the October meeting of the *JOURNAL* directors it was shown that only five shares of stock in the company remains unsold, and that so large a proportion of the shares are now held by the *alumnæ* associations that those associations will have a controlling vote in the stockholders' meeting.

It was also reported that a number of the individual stockholders were willing to dispose of their shares.

The policy of the directors during the past year has been to sell shares only to the *alumnæ* associations, although there have been many requests from individual nurses for such shares.

The directors are now hoping that the *alumnæ* associations will quickly take up the remaining shares, after which the shares of a number of the individual and original stockholders will be for sale and the policy to sell such stock only to the *alumnæ* associations will be adhered to for the present.

Last year the stock paid a dividend of three per cent., and the business year just closed shows a better financial situation than at any previous time.

THE SITUATION IN A NUTSHELL.

The *JOURNAL* was originally intended to be the property of the National *Alumnæ* Association. It was financiered in the beginning by

a small group of individual members with the understanding that the National Association would eventually reimburse them for their outlay and assume the financial management of the magazine. It has not been as yet considered expedient for the National Association to undertake entirely the financial responsibility of the JOURNAL, although it already owns several shares of stock.

In the meantime the affiliating *alumnæ* associations are buying up the stock and only five of the original shares remain unsold; it is hoped that during the coming year these associations will not only take up these five shares, but will also buy the shares now held by individual members. When this has been accomplished the next step will be for the National Association to buy out the affiliating associations, a few shares at a time, as the condition of its treasury will permit, and eventually become the exclusive owner of the magazine.

By this line of procedure the original plan is being perfected. The individual members who assumed the financial risk will have the money actually advanced refunded to them and their obligation to the *alumnæ* will be discharged. The National *Alumnæ* will have fulfilled its promises and the JOURNAL will be in fact what it has always been in inference, the organ and property of the National Association.

The immediate future of the JOURNAL is in the hands of the affiliating *alumnæ* associations. They hold the balance of power and will be responsible for the success or failure of the financial and professional policy of the magazine until such time as the National Association shall be able to assume the exclusive management.

In the hands of a score or more of women the JOURNAL has been financed and established, and with much anxious labor has become one of the recognized forces in the progressive life of nurses all over the world.

The experimental period has now passed, and that such a magazine can be both a professional and financial success has been undeniably demonstrated by the women who composed the original JOURNAL Company.

It is now up to the *alumnæ* associations to carry forward the work so well begun; this broader interest should be felt in two ways: first, in a greatly increased subscription list, for if the *alumnæ* associations have invested their money in a business they must certainly be interested in the financial returns as represented through the subscription list and the advertising pages, and, secondly, in a greater sense of individual responsibility for the character of the contents of the JOURNAL month by month.

A SPECIAL OFFER TO ALUMNÆ STOCKHOLDERS.

The directors have decided to offer to those alumnæ associations that are paid-up stockholders in the JOURNAL Company and who will include the subscription to the JOURNAL in the membership fee of their associations a reduction of fifty cents per annum, making the subscription price to all members of such alumnæ associations one dollar and fifty cents.

It must be distinctly understood that this offer is to alumnæ associations only owning stock in the JOURNAL, and that such associations must by a vote of the association have agreed to include the JOURNAL subscription in the membership fee, such subscriptions to be paid annually to the JOURNAL by some one officer or by a committee appointed by each alumnæ association for this work.

AN INCREASE IN THE STAFF OF COLLABORATORS.

It has been decided to increase the staff of collaborators of the JOURNAL this year with a view to securing at least one representative in each State. A number of names have been added to the list this month, as will be seen on the announcement page, but as the roll is not yet complete we reserve special mention until a later number.

THE OFFICIAL DIRECTORY.

We have published in this number a list of societies with the names of the officers, which it is our intention to have appear in each issue of the JOURNAL under the heading of "Official Directory." In getting the material together we found we were unable to supply all the data needed, and we hope before another number of the JOURNAL goes to press that the officers of those societies that are not accurately reported will see to it that the necessary corrections are sent to us.

This Directory is established for the convenience of the organizations' workers and because of a number of requests from our readers that such a list of addresses should be published in the JOURNAL, but to be of real value the names of the officers, with their addresses, must be correct, and we must be notified promptly of changes as quickly as they occur. When a society has a fixed date for the annual meeting we will add that fact, if so requested.

The object of the Directory is for convenience in correspondence, and it will also relieve the Editor from acting as a sort of clearing-house between the organizations and greatly lessen the number of letters that she must write every month.

PROGRESS OF STATE REGISTRATION

MINNESOTA.

The nurses of Minnesota organized a State association at a meeting held in St. Paul on October 10. There were one hundred nurses present and the interest showed that the nurses were thoroughly aroused.

The next session of the Legislature will not meet until 1907, before which time a strong organization can be built up and the nurses in the small as well as the larger cities will be ready to do their part in making the passage of a bill for the State registration of nurses a success. The report of the secretary is found in the Official Department of this issue of the JOURNAL.

COLORADO.

The Colorado State Trained Nurses' Association held a very delightful meeting for social and literary purposes at Boulder on October 12. That the Colorado nurses are progressive is shown in the titles of the papers in the official report given on another page, some of which will be published in this JOURNAL later on.

NEW YORK.

The New York State Nurses' semiannual meeting, held at Niagara Falls on October 17-18, contained some features of especial interest. The sessions were so arranged that the visiting members had ample time to see the Falls, and most delightful opportunities were provided for them to do this on the late afternoon of the first day in an automobile ride and on the second forenoon in a "special" trolley-ride through the Gorge. The Falls were never more magnificent and the beauty of the Gorge ride was greatly enhanced by the soft tints of the autumn foliage.

The visiting members were the guests of the nurses of Niagara Falls, who are not yet organized, and the members of the Erie County Alumnae of Buffalo, who made the meeting in Niagara an occasion to be remembered always with pleasure.

The State association was given the use of the assembly hall of the National Food Company for the meetings, where a reception was given on the first evening which gave the members an opportunity for better acquaintance. The presence at the reception of Mayor Cutler, of Niagara, added much to the pleasure of the evening.

It seems that the Mayor was once the victim of a serious accident which occurred in a neighboring city, and the kindness and skilful care which he received at the hands of the superintendent (a member of the State society) and nurses of the hospital in that city made such a deep

impression upon him that he seemed to feel that he owed a debt to the entire profession, which he took occasion to express when the nurses of the State gathered in his own city of Niagara.

The two papers given in the afternoon of the first day were listened to with great interest. The first one, by Miss B. Matilda Unger, was based upon experiences in nursing in other countries. The second, by Dr. Albert I. Lytle, of Buffalo, entitled "*Materia Medica, Pharmacy, and Therapeutics*," was most instructive and will be published in full later on in this JOURNAL. Dr. Lytle is one of the men who endorses State registration for nurses and who believes in educating the nurse to be an intelligent co-worker with the physician.

A partial report of the official proceedings will be found on another page. They will be given more fully in our next number.

Miss Dock's address on the progress of State registration in other countries could not fail to have impressed those who look upon registration in a narrow, personal way with the importance of the movement from an international standpoint. She gave a wealth of history in very concise form which we shall publish later on.

A carefully prepared paper was presented by Dr. George E. Blackman, of Dunkirk, on "*The Place of the Small Hospital and Training-School in the Community*." While nurses will all agree with Dr. Blackman upon the usefulness of and benefit to the community of the small hospital, they cannot agree with him that the small hospital can always give an adequate training to its pupils in all branches of nursing, although such training may be made most thorough so far as it goes.

Perhaps in the history of the New York State association no event has been of greater interest than that given by the presence of Dr. Henry L. Taylor, of the State Education Department at Albany, who is at the head of the division for the registration of schools and who has from the time of the passage of the nursing act brought his vast experience in the registration of the schools and colleges of the other professions to bear upon the registration of training-schools for nurses.

Dr. Taylor gave a résumé of the work of the Department and of the Nurse Board of Examiners since the law went into effect and answered many questions in regard to obscure points, but there was not as much criticism of the working of the law as it had been hoped would be brought out to serve as a guide in the work of administering the law in the immediate future. The few criticisms that were made were very petty and showed a great lack of intelligent comprehension of the subject. We were impressed with the fact that those nurses who are dissatisfied with the law have not taken the trouble to inform themselves about it.

THE LAST PRACTICAL EXAMINATION

THE last practical examination to be held under the terms of the waiver will be in January, 1906, after which time the only nurses eligible for the full examination will be those who have entered a training-school and graduated since the passage of the act in April, 1903, and the graduates of hospitals of registered schools.

The terms of the waiver, which provides that graduates of registered schools shall be exempt from examination, expires in April, 1906, not in January, 1906, as has been erroneously stated, and we urge upon all nurses who are eligible for such exemption to get in their applications quickly. So many have been dilatory that there is already evidence that towards the end of the term the congestion will make the work of the examiners most overwhelmingly difficult.

What we have said to the nurses of New York applies equally to nurses in other States. Procrastination seems to be a habit with nurses all over the country in matters that directly concern their own welfare, and in the matter of taking the trouble to file their applications the nurses in all the States seem to be a good deal alike. We are inclined to think that the terms of the waiver have been made too easy; if a stiff examination were one of the requirements every nurse would be interested and in a terrible anxiety to get it over and get her R. N.

A CORRECTION

“WITH respect to some recent comments that we published on the *Nursing Times*, a journal lately started in London, we are asked to state authoritatively that it is owned and controlled wholly by Messrs. Macmillan, and that it represents no party in nursing politics, but aims simply at providing nurses in Great Britain with a useful, interesting, and impartial journal, devoted to their interests.

We are of the opinion, however, that if there were need of such a magazine in England as the *Nursing Times* that the nurses who, it is claimed, are its supporters should have had enterprise enough to have started it for themselves. We do not consider that journals gotten out by even such reputable houses as the Macmillan Company can be classed as professional journals. They are established purely for commercial purposes, and if there is profit in such publications the nurses should be farsighted enough to provide for such profit to come back to the nursing profession when the members are to be the contributors and subscribers.

We think it is much to be deplored that there is such a lack of unity among the nurses in Great Britain, but if it is not possible for them all to support the *British Journal*, then the dissenting party should at least have had the courage and ability to get out a magazine such as they wanted, and not have left it for a business house to do it for them. We have reprinted in this number a letter which appeared recently in the *British Journal* on this very subject of the two kinds of nursing magazines which expresses very much our own views. Nurses need to think about these matters.

ETHER DAY

"ETHER DAY" at the Massachusetts General Hospital, Boston, was observed this year as a surgical clinic day for nurses. Operations were performed by Drs. H. H. A. Beach, Francis B. Harrington, and Maurice H. Richardson, and there was a large attendance of graduate and pupil nurses from the schools in and near Boston.

Tea was served in the Dome, where ether was first given on October 16, 1846.



LIQUID AIR IN SURGERY AND SKIN DISEASES.—The *Journal of the American Medical Association*, quoting from the *Australasian Medical Gazette*, says: "Liquid air, if applied to the skin lightly and cautiously repeated for a few minutes, Beckett says, will produce a refrigerating effect of any degree of intensity desired, with a resulting complete local anæsthesia under the influence of which small surgical operations can be done. If applied too freely and for too long a time, frost-bite effects are produced, even to causing ulceration of the skin. The application is not painful unless the parts are tender and sensitive. Beckett has made use of liquid air in cases of a superficial and more or less malignant nature that have existed and have been incurable for a length of time, such as lupus, rodent ulcer, and small epitheliomas. Compared with the *x*-rays, the effect of liquid air is instantaneous; it acts superficially and its use is very simple. All the apparatus required, besides the liquid air, is a suitable glass rod with a small piece of cotton-wool wound around the tip of it, the size and shape depending on the degree of intensity required to be attained. When the surface is raw or ulcerated, it is advisable to cut and to place over it a small piece of gauze; otherwise the cotton-wool will be quickly frozen to the surface."